

FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI

COMPLAINT

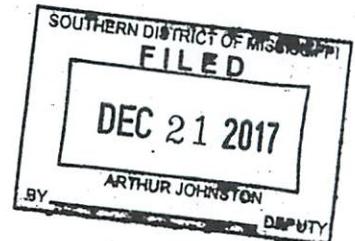
McMullen, Jr. K3421
(Last Name) (Identification Number)

Steve Brian
(First Name) (Middle Name)

South Mississippi Correctional Institution
(Institution)

PO Box 1419 • Leakesville, MS 39451

(Address)
(Enter above the full name of the plaintiff, prisoner, and address
plaintiff in this action)



V. CIVIL ACTION NUMBER: 5:17-cv-152 DCB-MTP
(to be completed by the Court)

Dianne Walker ;

Gabriel Walker ;

Officer Davis ;

Wilkinson County Correctional Authority

(Enter above the full name of the defendant or defendants in this action)

OTHER LAWSUITS FILED BY PLAINTIFF

NOTICE AND WARNING:

The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

A. Have you ever filed any other lawsuits in a court of the United States? Yes () No (✓)

B. If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse side of this page or additional sheets of paper.)

1. Parties to the action: N/A

N/A

N/A

2. Court (if federal court, name the district; if state court, name the county): N/A

N/A

3. Docket Number: N/A

4. Name of judge to whom case was assigned: N/A

5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?): N/A

PARTIES

(In item I below, place your name and prisoner number in the first blank and place your present address in the second blank. Do the same for additional plaintiff, if any).

I. Name of plaintiff: Steve McMullen Prisoner Number: K3401
Address: SMCI
PO Box 1419
Leakesville, MS 39451

(In item II below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use the space below item II for the names, positions, and places of employment of any additional defendants.)

II. Defendant: Dianne Walker is employed as
Unit Manager at Wilkinson County
Correctional Facility by Management & Training Corporation (MTC)

The plaintiff is responsible for providing the court the name and address of each plaintiff(s) as well as the name(s) and address(es) of each defendant(s). Therefore, the plaintiff is required to complete the portion below:

PLAINTIFF:

NAME: Steve McMullen ADDRESS: # K3401 • PO Box 1419 • Leakesville, MS 39451
N/A N/A

DEFENDANT(S): FNL

NAME: Unit Manager Dianne Walker ADDRESS: MTC/WCCF • 2999 US Hwy 61 N • Woodville, MS 39669
Deputy Warden Gabriel Walker MTC/WCCF • 2999 US Hwy. 61 N • Woodville, MS 39669
Officer Davis FND MTC/WCCF • 2999 US Hwy 61 N • Woodville, MS 39669
Wilkinson County Correctional Authority MTC • 2999 US Hwy 61 N • Woodville, MS 39669
N/A N/A
N/A N/A

FNL: All defendants are being sued in their individual AND official capacities.

FND: Defendant Davis can be further identified by prison logs as the officer on duty @ WCCF in CDE Housing Unit on 11-5-17 when I was attacked.

GENERAL INFORMATION

A. At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?

Yes () No ()

B. Are you presently incarcerated for a parole or probation violation?

Yes () No ()

C. At the time of the incident complained of in this complaint, were you an inmate of the Mississippi Department of Corrections (MDOC)?

Yes () No ()

D. Are you currently an inmate of the Mississippi Department of Corrections (MDOC)?

Yes () No ()

E. Have you completed the Administrative Remedy Program regarding the claims presented in this complaint?

Yes () No () , if so, state the results of the procedure: Grievance was rejected ; no further AVAILABLE administrative remedies exist.

F. If you are not an inmate of the Mississippi Department of Corrections, answer the following questions:

(N/A)

1. Did you present the facts relating to your complaint to the administrative or grievance procedure in your institution?

Yes () No ()

2. State how your claims were presented (written request, verbal request, request for forms): _____

3. State the date your claims were presented: _____

4. State the result of the procedure: _____



STATEMENT OF CLAIM

- III. State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet if necessary.)

Defendants exercised malicious intent and deliberate indifference in failing to protect the Plaintiff from repeated brutal assaults at the hands of other inmates.
While this is a failure to protect claim, the case will reveal staff corruption, collusion between staff and inmates, and a culture of failing to protect inmates or intentionally allowing inmates to be assaulted at WCCF.

"Statement of Facts" is attached hereto as "Addendum One".

The Defendants' deliberate indifference to Plaintiff's physical safety resulted in brutal beatings that could and should have been prevented.
This failure to protect is a grossly intentional violation of Plaintiff's 8th Amendment rights and protections.

RELIEF

- IV. State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

- ① Declaratory judgment that defendants violated plaintiff's 8th Amendment rights
- ② Nominal damages : \$1 per defendant
- ③ Compensatory damages : \$7,497 pain and suffering
- ④ Punitive damages : \$10,000 from defendant Dianne Walker
\$ 5,000 from defendant Gabriel Walker
\$ 2,500 from defendant Officer Davis

Signed this 6th day of December, 20 17.

X Steve B.M. Wallin

PO Box 1419 • Leakesville, MS 39451
Signature of plaintiff, prisoner number and address of plaintiff

I declare under penalty of perjury that the foregoing is true and correct.

DEC 06 2017

(Date)

X Steve B.M. Wallin
Signature of plaintiff

STATEMENT OF FACTS

In September 2015 McMullen was housed in "protective custody" (PC) on Delta Pod at the Wilkinson County Correctional Facility (WCCF). McMullen began having conflicts with other inmates and reported his problems to Unit Manager Dianne Walker. McMullen's mother also called Unit Manager Dianne Walker and spoke to her about McMullen's conflicts. Further, McMullen attempted to use the PREA hotline to notify investigators of his problems; he reported problems to the hotline atleast eight (8) times between 9-17-15 and 10-29-15 , to no avail. No action was taken . McMullen was left on Delta Pod with inmates he reported having conflict with .

On November 1, 2015 inmate L.C. Fisher used a contraband cellphone provided by Unit Manager Dianne Walker to call McMullen's mother and manipulate money from her. On November 2, 2015 inmate L.C. Fisher attempted to stab McMullen but McMullen was able to escape the attack which was witnessed by staff. McMullen pleaded for his safety and begged to be moved to another pod , but Unit Manager forced him back into Delta Pod where L.C. Fisher remained . She did , however , lock McMullen in his cell and tell staff not to open the door per orders of a captain . L.C. Fisher was NOT searched for the weapon .

On November 3, 2015 L.C. Fisher and Craig Lee gave McMullen's cellmate a knife and payment in the form of spice with instructions to stab McMullen. On November 4, 2015 the cellmate attempted to execute the assault plan . McMullen deflected the attack with his hands but was stabbed in the hand . Unit Manager Walker and Captain Albernaut responded . McMullen was taken to medical for wound treatment .

Upon release from Medical on November 4, 2015 Unit Manager Perkins and Officer Boyd placed McMullen on Echo Pod .

However , on November 5, 2015 Unit Manager Walker moved McMullen back to Delta Pod with the inmates who TWICE tried to attack him with Knives . During the movement , Unit Manager Walker told McMullen , " You are going to get your issue and made to live on Delta Pod " . The captains orders to NOT open my cell remained in effect .

Nevertheless , Officer Davis opened my cell door on November 5, 2015 and allowed Craig Lee and Raymond Stilley to enter McMullen's cell . McMullen was placed in a choke hold , dragged to the floor , and held there until he passed out . McMullen awakened to find himself hogtied . Officer Davis AGAIN opened McMullen's cell door to allow L.C. Fisher into the cell with two mugs of boiling water and a knife . As Raymond Stilley held McMullen's shoulders to the floor , Fisher sat on McMullen's legs while Lee passed the water ~ boiling with baby oil mixed in ~ to Fisher who poured it over McMullen's head and face . Fisher then stabbed McMullen as he lost consciousness and left him for dead .

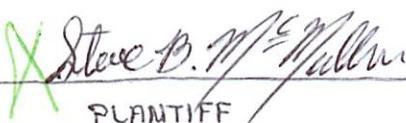
McMullen awakened later in pools of blood and was able to call for help from an officer at 10 pm count time ; the officer summoned assistance .

McMullen was taken to a hospital emergency room and treated for stab wounds to his head and face, second degree burns, and scalding inside his mouth, nose, and ears.

Upon return to the facility, Unit Manager Walker's brother, Deputy Warden Gabriel Walker was furious that McMullen had been taken to the hospital because the visit created a record of the incident. Gabriel Walker attempted to conceal the incident nevertheless by segregating McMullen and refusing to allow him to call his family. Gabriel Walker also obstructed McMullen's requests that the DA be involved and the attackers be prosecuted.

DEC 06 2017

DATE



PLAINTIFF

End.